

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, PO Box 1450, Alexandria, VA , 22313-1450 on 10 January 2007

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara  
(Signature of Person Mailing Paper or Fee)



**PATENT APPLICATION**  
**Attorney Docket No. SUN-P5343**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE PATENT APPLICATION OF )  
 ) Examiner: Callahan, Paul E.  
Radia J. Perlman )  
 ) Group Art Unit: 2137  
Serial No. 09/691,278 )  
 )  
Filing Date: 17 October 2000 )  
 )  
Title: METHOD AND APPARATUS FOR PROVIDING )  
A KEY DISTRIBUTION CENTER WITHOUT )  
STORING LONG-TERM SERVER SECRETS )

**AMENDMENT TRANSMITTAL LETTER**

Mail Stop: Amendment  
Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ [x] Response under 37 C.F.R. § 1.111 to official action mailed 10 October 2006.
- ☐ [ ] A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- ☐ [ ] Terminal disclaimer under 37 C.F. R. § 1.321(c), including
  - ☐ [ ] check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
  - ☐ [ ] 2 certificates under 37 C.F.R. § 3.73(b).
- ☐ [ ] Information disclosure statement, form 1449 and \_\_\_ references.
- ☒ [x] No additional claims fees are required.


[ ] An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

- [ ] A check in the amount of \$\_\_\_ is enclosed.  
[ ] Charge \$\_\_\_ to Deposit Account No. \_\_\_ (Docket No. \_\_\_).  
[x] Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P5343).

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Respectfully submitted,

By   
Shun Yao  
Registration No. 59,242

Date: 10 January 2007



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Application Number : 09/691,278  
Applicant : Radia J. Perlman  
Filed : 17 October 2000  
TC/A.U. : 2137  
Examiner : Callahan, Paul E.

Confirmation Number: 4965

Docket Number : SUN-P5343-RSH  
Customer No. : 57,960

M/S: Box Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

### AMENDMENT

Sir

In response to the Office Action mailed on **10 October, 2006**, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 14 of this paper.